## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000007528

Entity Name: FOUR CORNERS MINISTRIES, INC.

FILED Jan 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 91645 OVERSEAS HIGHWAY TAVERNIER, FL 33070 **Current Mailing Address: New Mailing Address:** 91645 OVERSEAS HIGHWAY TAVERNIER, FL 33070 FEI Number: 27-0033643 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MULICK, NICHOLAS W NICHOLAS W. MULICK, PA 91645 OVERSEAS HWY TAVERNIER, FL 33070 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition REID, DENISE Name: Name: 91645 OVERSEAS HWY Address: Address: City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: REID, KEVIN Name: Address: 91645 OVERSEAS HWY Address: City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: Title: () Delete Title: () Change () Addition MULICK, NICHOLAS W Name: Name: 91645 OVERSEAS HIGHWAY Address: Address: City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: MULICK, NANCY J Name: 91645 OVERSEAS HIGHWAY Address: Address: City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ROMEROS, CARLOS ROMEROS, CARLOS Name: Name: 20034 SW 128TH PL 10255 SW 132ND CT Address: Address: City-St-Zip: MIAMI, FL 33177 City-St-Zip: MIAMI, FL 33186 Title: () Delete Title: () Change () Addition HUNDY, NIGEL Name: Name: Address: 590 NW 159TH ST Address: MIAMI, FL 33169 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICHOLAS W. MULICK D 01/28/2009